

REGIONAL ROUND-UP January 2019

Early Identification:

A New Priority Indicator for the 2019/20 Quality Improvement Plans

What is a Quality Improvement Plan (QIP)?

- a commitment that a health care organization makes to its patients, staff, and community and to the Ontario public as a whole to improve quality through focused targets and actions.
- a way of harmonizing dialogue and encouraging peer-to-peer sharing and benchmarking
- one means to help entrench quality improvement culture as a system-wide effort

Qua	lity Priorities for the 20	019/20 Quality Imp	rovement Plans	Health Quality Ontario Let's make our health system health
	Hospital	Primary Care	: Home and : Community Care	Long-Term Care
	TH	HEME I: TIMELY AND EFFIC	IENT TRANSITIONS	
Efficient	Alternate level of care (ALC) rate NEW Number of inpatients receiving care in unconventional spaces	7-day post-hospital discharge follow-up	Unplanned emergency department visits within 30 days of hospital discharge	Potentially avoidable emergency departments visits
Timely	NEW Time to inpatient bed * Discharge summaries sent from hospital to community care provider within 48 hours of discharge	Timely access to a primary care provider	NEW Wait time to long-term care home placement	
		THEME II: SERVICE E	XCELLENCE	
Patient- centred	Patient experience: Did you receive enough information when you left the hospital? Complaints acknowledged in a timely manner	Patient involvement in decisions about care	Percentage of patients satisfied with services Complaints acknowledged in a timely manner	Resident experience Complaints acknowledged in a timely manner
		THEME III: SAFE AND EF	FECTIVE CARE	
Safe	Number of workplace violence incidents (overall)*	NEW Percentage of non- palliative care patients newly dispensed an opioid		
Effective	NEW Early identification: Documented assessment of needs for palliative care patients Readmission within 30 days for mental health and addiction Medication reconciliation at discharge	NEW Early identification: Documented assessment of needs for palliative care patients	NEW Early identification: Documented assessment of needs for palliative care patients	VEW Early identification: Documented assessment of needs for palliative care patients
		Equitable		
	* Mandatory indicator (hospital sector only)			Updated: December 7, 2018

To learn more about the Annual Priorities for the 2019/20 Quality Improvement Plans, please click here.

As a Network, we feel strongly that this offers an important opportunity to share the learnings from the Coordination of Care Working Group in Lanark Leeds Grenville. This group identified and will be testing an EMR Toolbar (Telus Practice Solutions Suite) for use in primary care, which facilitates earlier identification and support for patients who could benefit from the palliative care approach. We will be exploring ways to engage with more organizations who are interested in or doing similar work to improve palliative care within the South East region.

If you have interest in learning more or want to participate in the conversation about this Priority Indicator, please email our Network Lead, Hilary Blair at hilary.blair@lhins.on.ca or we may be reaching out to you as well!

Early enrollment in palliative care can lower risk of hospitalization in the last two weeks of life



Study shows that early palliative care is less available to people dying of non-cancer causes, suggesting that these populations could benefit most from improved early identification.

The researchers examined administrative health records from the last two weeks of life for nearly a quarter of a million Ontarians (2010-2012).

They looked to see if starting palliative care early is associated with less hospitalization in the last two weeks of life.

They grouped the population by those who started palliative care early before death (60 days or more), late (15 - 59 days), very late (14 days or less), or never.



BETTER OUTCOMES WITH EARLY PALLIATIVE CARE:

Fewer days in hospital in the last two weeks of life:

More likelihood of a non-hospital death:

PEOPLE DYING FROM NON-CANCER CAUSES WERE MUCH LESS LIKELY TO GET EARLY PALLIATIVE CARE:



Qureshi D. et al. Palliat Med. 2018.

ICES Data. Discovery. Better Health. ices.on.ca



HEALTH SCIENCES



Image courtesy of ICES

Speak Up Ontario Website Refresh

HPCO has recently refreshed its Speak Up Ontario website (www.speakupontario.ca) to provide users with easier access to the many tools and educational resources currently available on Health Care Consent, Advance Care Planning and Goals of Care in Ontario. The new website includes:



- The updated 2018 Health Care Consent and Advance Care Planning Ontario Workbook
- · The Health Care Consent, Advance Care Planning and Goals of Care Electronic Resource Guide
- · Health Care Consent and Advance Care Planning Videos, Posters and Post Cards

Please <u>click here</u> for more details.

Framework on Palliative Care in Canada

In late 2017, the Act Providing for the Development of a Framework on Palliative Care in Canada was passed by the Parliament with all-party support. During the spring and summer of 2018, Health Canada consulted with provincial and territorial governments, other federal departments, and national stakeholders, as well as people living with life-limiting illnesses, caregivers and Canadians to develop the Framework which was tabled in the Parliament on December 4, 2018.

This Framework outlines the vision, goals and priorities expressed by consultation participants to improve palliative care in Canada. It will help support improved access to palliative care by providing a useful reference point for governments, stakeholders, caregivers and communities to help identify common directions and opportunities, address gaps, and share best practices. The full Framework is available here.

Survey: Improving Health Care and Ending Hallway Medicine

The Premier's Council on Improving Health Care and Ending Hallway Medicine was formed in October 2018 to serve as an experienced and knowledgeable body to identify strategic priorities and actions that will lead to improved health and wellness outcomes for Ontarians, high patient satisfaction, and more efficient use of government investment, using an effective delivery structure. The Council is conducting a *survey to hear about people's experiences with Ontario's health care system and their ideas for transforming health care* in the province. The survey is available here.

Consensus-Based Definition of Palliative Care

One of the challenges in the implementation of palliative care has been a lack of consensus on what palliative care is, when it should be applied, to whom and by whom. The terms "palliative care" and "hospice care" have been used for many years, with different interpretations and several palliative care organizations have in turn, adopted their own definitions.



The current WHO definition for palliative care for adults was developed in 2002 and poses many challenges, limits palliative care to problems associated with life-threatening illnesses, rather than the need of patients with severe,

chronic and complex conditions.

During 2018, the International Association for Hospice & Palliative Care (IAHPC) developed a process based in three phases, including a large survey with over 400 IAHPC members from 88 countries. The objective of the project was to develop, based on consensus, a palliative care definition that is focused on the relief of suffering that is timely and applicable to all patients regardless of the diagnosis, prognosis, geographic location, point of care and income level. A paper with the description of the methodology has been submitted to a peer reviewed journal for dissemination.

In December, IAHPC announced the launch of a global, consensus-based definition of palliative care:

Palliative care is the active holistic care of individuals across all ages with serious health-related suffering due to severe illness, and especially of those near the end of life. It aims to improve the quality of life of patients, their families and their caregivers...

Please click <u>here</u> to read the full definition and to endorse the definition if you would like to. Signatures will be collected until February 28th, 2019, when the list of individuals and organizations endorsing the definition will be submitted to the WHO.

Call for Membership for OPCN Clinical Advisory Council—Deadline Extended!

We are pleased to provide the Call for Membership to recruit leaders in palliative care to join the Ontario Palliative Care Networks' Clinical Advisory Council. Formed in October 2016, the purpose of the Clinical Advisory Council is to provide advice and recommendations to the Executive Oversight and other Advisory Councils for clinical improvements in hospice palliative care in Ontario. As well, the Council provides advice on the clinical implications of policy, access to care, quality improvement strategies and service structure for the palliative care system in Ontario.

To learn more about the role and membership of the Clinical Advisory Council and how to apply, please refer to the Terms of Reference and Call for Membership. Applications for membership are due by January 14, 2019.

To note: the first meeting of the council is scheduled to take place on February 26th 2019 from 3-5pm. We ask that all applicants please hold this as a potential date in their calendars.

Ahmed Jakda MD, MBA, CCFP (PC) Provincial Clinical Co-Lead Ontario Palliative Care Network Susan Blacker, MSW, RSW
Provincial Clinical Co-Lead
Ontario Palliative Care Network



Ontario's Government for the People Supporting Compassionate End-Of-Life Care

Helping more people get end-of-life care in a home-like setting Ministry of Health and Long-Term Care

News Release: December 10, 2018

Ontario's Government for the People is providing more people across the province with the compassionate care they deserve when nearing the end of their lives.

Christine Elliott, Deputy Premier and Minister of Health and Long-Term Care, was joined by Effie Triantafilopoulos, Parliamentary Assistant to the Minister, and Jane McKenna, MPP for Burlington, at Carpenter Hospice to announce that the government is moving forward with plans to build 193 new hospice beds across Ontario.

"Building new hospice beds across Ontario will provide people with end-of-life care and support in a more comfortable setting," said Elliott. "With early investments like these, our government is ensuring that these patients are provided with the proper comfort, dignity and respect they deserve. This will also help to make more beds available for those who need hospital care. Our government is moving forward quickly to address challenges facing the health care system as we develop our long-term transformational health care strategy."

Hospices provide patients with palliative care in a comfortable space, where they can be close to loved ones. In this environment, family and friends can have peace of mind knowing that patients will have access to appropriate end-of-life care. Hospice care focuses on relieving suffering and providing services like psychological, spiritual and bereavement support.

"Our government is increasing access to hospice beds across the province, by providing appropriate end-of-life care for those who need it," said Triantafilopoulos. "This investment is also helping to address hallway health care, by ensuring more hospital beds remain available for those in need of acute care. We're creating more beds and spaces to alleviate the pressures on our health care system."

"Everyone should have access to dignified end-of-life care that respects the wishes of the patient and their loved ones," said McKenna. "That's why I am proud our government is committed to improving access to comfortable, end-of-life care in communities across the province like Burlington."

Quick Facts

- Ontario is investing nearly \$33.6 million to build 193 new hospice beds across the province.
- When these beds open, the government will provide \$20.3 million each year in operational funding for nursing, personal support, and other services.
- The government is supporting an additional 6,000 new long-term care beds the first wave of more than 15,000 new long-term care beds being added in the next five years.
- Ontario is investing an additional \$90 million in 2018-19 to build 1,100 beds and spaces in hospitals and the community, including 640 new beds and spaces.

Education Opportunities

FUNDAMENTALS OF HOSPICE PALLIATIVE CARE

CORE FUNDAMENTALS an eight-week program for those working in the health system interested in developing their capacity in hospice palliative care.

BELLEVILLE - Jan 23, Feb 13, 27 - Registration deadline: January 14, 2019 **Program information and registration**

NAPANEE - Feb 7, 20, Mar 7 - Registration deadline: January 30, 2019 Program information and registration

BELLEVILLE - March 1, 21, April 11 - Registration deadline: February 15, 2019 Program information and registration

COMPREHENSIVE ADVANCED PALLIATIVE CARE EDUCATION (CAPCE) program is open to Nurse Practitioners, Registered Nurses and Registered Practical Nurses. The prerequisite for registration in CAPCE is the Fundamentals of Hospice Palliative Care core course with the Enhanced Day, OR the previous offering of Level 1 PC education.

KINGSTON - In-Person & Coaching dates - Registration deadline: January 7, 2018 Program brochure and registration

LEAP (LEARNING ESSENTIAL APPROACHES TO PALLIATIVE CARE) LONG TERM CARE provides learners with the essential, basic competencies of the palliative approach to care.

MARMORA - February 2, 3 2019 - Registration deadline: January 23, 2019 Program brochure and registration

In the News

Why more needs to be done in end-of-life care for adults with complex needs

CBC.ca

Tristan Lederman was born hydrocephalic and had cerebral palsy. He could not see, walk or do anything for himself, relying on his parents and ...

Brockville gratitude in bloom

Brockville Recorder and Times

Coun. Mike Kalivas honoured the Friends of Palliative Care Golf Tournament, with co-chairmen Dave Publow and Jim Cooper accepting the plaque.

Fire and flood: Red Cross on PEI has busy year

CBC.ca

... also loaned out more than 1,500 pieces of health equipment to clients recovering from surgery, returning home from hospital, or in palliative care.

Hospice gets provincial funding for new home

Intelligencer

Ontario is investing \$1.2 million in Hospice Quinte's new residential hospice in Bayside.

SAVE THE



